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# For National Nutrition Month...continued from page 3

ing) specific foods, nutrient supplements or combinations of foods may cure disease or offer quick weight loss are key features of fad diets.

- Find your balance between food and physical activity. Regular physical activity is important for your overall health and fitness plus it helps control body weight, promotes a feeling of well-being and reduces the risk of chronic diseases.
- Food and nutrition misinformation can have harmful effects on your health and well-being, as well as your wallet. Registered dietitians are uniquely qualified to communicate current and emerging science-based nutrition information and are an instrumental part of developing a diet plan that meets your individual needs.

With approximately 65,000 members, the American Dietetic Association is the nation's largest organization of food and nutrition professionals. ADA serves the public by promoting optimal nutrition, health and well-being. To locate a registered dietitian in your area, visit the American Dietetic Association at www.eatright.com

# • 3-15-07: Diabetes Prevention Committee. Meeting at ICHS. 10 a.m.

• 3-29-07: REACH Coalition meeting. 2 — 5 p.m. Place to be announced.

**Upcoming Events** 

and Announcements

For more detailed information on these and other events, please contact Blishda Lacet, REACH Program Manager at (206) 296-7621.

# FOR NEWSLETTER HARDCOPY, PLEASE CONTACT:

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www.metrokc.gov/health/REACH

If you have suggestions or want to submit articles for the newsletter, please contact Javier Amaya at <a href="mailto:javier.amaya@metrokc.gov">javier.amaya@metrokc.gov</a> or (206) 205-3921 by the 10<sup>th</sup> of April, June, August, October and December.

### **REACH** for Health

Attn: Blishda Lacet
Public Health – Seattle & King County
999 Third Avenue, Suite 500
Seattle, WA 98104

The mission of the REACH Coalition is to reduce diabetes health disparities experienced by communities of color. Through strong partnerships, REACH will support the empowerment of individuals, families, and communities, and create sustainable long-term approaches to prevention and control of diabetes utilizing all appropriate community resources in King County.

# REACH FOR HEALTH

Volume II Issue I

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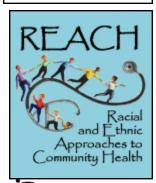
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# "Preventing diabetes in our communities. It is time to act"



# By Blishda Lacet, MPH, MBA REACH Program Coordinator.

The REACH coalition, with the support of Washington State Department of Health (DOH), began the first phase of an ambitious project to prevent Type 2 diabetes among people of color most at risk.

The coalition is knowledgeable about diabetes education, self-care guidelines and promotion of changes that can help people with diabetes live more healthy and active lifestyles. In many years of work, we have learned a lot about the need to tailor these principles to the characteristics and

cultural sensitivity of our target population. We have identified the socio-economic aspects of this epidemic along with the practical challenges of improving the quality of life of people with diabetes.

The REACH coalition has a clear understanding of the value of looking "upstream" to see what can be done to identify those that are at high-risk for diabetes and to develop an intervention that will result in the prevention or delayed onset of this disease.

For these reasons, the coalition has formed a committee to tackle this issue. From January until the end of March 2007, the recently formed Diabetes Prevention Committee (DPC) will be talking to a number of leaders in our communities, asking them for their ideas about developing a plan with multiple strategies that will have a large impact on those who are at risk.

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# **Cheza's Chat Corner**



Thoughts about Diabetes Prevention

Can we really prevent diabetes? What do you think? For many of us who either live with diabetes or have close family members or friends with diabetes, we may not believe it's possible.

Some of us take it for granted that we will "get" diabetes and suffer its complications just like our relative (s) who had kidney failure, or lost several toes, or became blind, or died of heart disease – all because he or she had diabetes.

But then, what about the people who will tell their stories of having pre-diabetes, or early stage diabetes, who began a serious regimen of physical activity and healthy eating, lost weight and found that by doing so they also either prevented a full diagnosis of diabetes or controlled their diabetes.

For these folks, medications may never be necessary, or they may have been able to significantly delay the

time when they would need medications. They may never develop complications like those mentioned above, and they may die from some other cause, not diabetes-related.

Wouldn't it be nice if we could delay "getting" diabetes in the first place, or at least delay the complications of diabetes long enough so that we actually die of old age, rather than dying from a diabetes-related cause?

In a society that pushes diabetes-causing products and lifestyles at us daily, we still believe it is possible to prevent it, or to substantially delay the onset of diabetes or its complications. Staff members of the REACH program at several of our Coalition member agencies are actively working with our State Department of Health (DOH) to create a plan for preventing diabetes.

We applaud the Centers for Disease Control and Prevention for moving forward on a prevention agenda and we hope to be able to implement diabetes prevention planning, with their support, as well as local state and other support.

Cheza Garvin, PhD, MPH, MSW is the director of the Chronic Disease Prevention and Healthy Aging Program for Public Health, Seattle & King County.

# **Rox's Review: Evaluation Update**



These days in evaluation, we have been casting our focus on "closing" activities as we prepare for the completion of our REACH Phase II grant.

This means we will be ramping down our participant survey collection – in case you are wondering, we are currently at 908 matched post-test surveys – while ramping up on other evaluation activities such as conducting interviews with past participants, staff and Coalition members, final analyses of survey and Registry data, and disseminating via presentations and publications the lessons learned through REACH.

Speaking of dissemination, we currently have a few papers in the works about the Coalition and systems change, and we have had three abstracts accepted for presentation this spring.

In mid-April, we will present a poster at the Campus Community Partnerships for Health (CCPH) Conference in Toronto, Canada, about the REACH Coalition and how we have integrated cultural tailored approaches in all aspects of our programming.

At the CDC's Department for Diabetes Transla-

tion (DDT) Conference in Atlanta, GA, April 30-May 3, 2007, we will give an oral presentation about our REACH interventions and efforts toward sustainability. The Society of Public Health Educators (SOPHE) will host their National Health Education Conference here in Seattle this June, where we will present on the REACH Coalition's evolution and its role in influencing organizational systems and policies for sustained change.

Needless to say, these next few months will be an especially busy time as we juggle final data collection with grant writing, paper writing and presentations.

We have learned and are still learning a great deal about working together as a diverse coalition to address diabetes disparities, and we are glad for these opportunities to document and share these lessons with others.

As always, if you have any questions about the REACH evaluation plan, our findings, or have topic suggestions for dissemination, let me know. I'd love to hear from you.

You can contact Roxana Chen MPH, Evaluation Manager for REACH at Public Health - Seattle & King County at: roxana.chen@metrokc.gov or by phone (206) 205-4162.

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# For National Nutrition Month® 2007, the Best Path to Fitness and Health Is to Be 100% Fad Free

Media contact: Jennifer Starkey, Julia Dombrowski, Tom Ryan 800/877-1600, ext. 4802, 4769, 4894 media@eatright.org

CHICAGO – Diet fads come and go, and some may help you lose weight – in the short term. For National Nutrition Month® 2007, the American Dietetic Association says the most effective long-term way to achieve a healthful lifestyle is to be 100% Fad Free.

"You can lose weight on virtually any diet," said registered dietitian and ADA spokesperson Roberta Anding. "If you eat less, you will lose weight. The question is, can you maintain a healthy lifestyle over the long term – your life? The real key to reaching long-term goals is to focus on your overall health."

Through National Nutrition Month, created in 1973, the American Dietetic Association promotes healthful eating by providing practical

nutrition guidance and focusing attention on making informed food choices and developing sound physical activity habits. National Nutrition Month also reminds consumers that registered dietitians are their most valuable and credible source of timely, science-based information.

Anding encourages everyone to keep in mind these National Nutrition Month key messages to enjoy a 100% Fad Free lifestyle:

- Develop an eating plan for lifelong health. Too often, people adopt the latest food fad rather than focusing on overall health. Get back to basics and use the new Dietary Guidelines for Americans and MyPyramid as your guide to healthy eating.
- Choose foods sensibly by looking at the big picture. A single food or meal won't make or break a healthful diet. When consumed in moderation in appropriate portions, all foods can fit into a healthful diet.
- **Learn how to spot a food fad**. Unreasonable or exaggerated claims that eating (or not eat-

"Preventing diabetes in our communities. It is time to act" (continued from page 1)

In addition, a new pilot project will identify those at risk for diabetes and connect them to necessary resources.

This pilot project will guide our efforts to develop the core components of a prevention plan.

REACH coalition members: the Center for MultiCultural Health (CMCH), the International Community Health Services (ICHS) and Sea Mar Community Health Centers will screen clients from African-American, Asian and Latino ancestry.

At the end of the pilot, the Diabetes
Prevention Committee will identify interventions
that focus on the individual and the family, and the
systems and barriers that affect health outcomes.

This last component is crucial to understand what needs to be changed in health education, health care settings, food industry practices, advertising, and policy in order to reduce the dramatic increase of diabetes in our communities.

For more information on the Diabetes Prevention Committee (DPC) and their recommendations, please contact Blishda Lacet at: Blishda.Lacet@metrokc.gov or by phone at (206) 296-7621.